

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 101656431	FILING DATE			
						APPLICANT(S)				
	CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1									
2		1								
3	1									
4		1								
5	1									
6		1								
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49										
50										
TOTAL IND		6		1						
TOTAL DEP		8	←	1	←	1	←	1	←	
TOTAL CLAIMS		14								